SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)

FOR LINE NUMBER:						PAGE		7	OF		80
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16			17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Ohio Democratic Party Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rowe, Kevin, , , Date of Receipt Mailing Address 417 Los Altos Way 2021 City Zip Code State Transaction ID: 11ai-000591448 NM Santa Fe 87501 Amount of Each Receipt this Period FEC ID number of contributing C 9900.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) K Rowe Investments LLC Managing Member Receipt For: Aggregate Year-to-Date ▼ Primary General Earmarked through ACT Blue 9900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jones, William, , , Date of Receipt Mailing Address 2224 Middlefield 2021 City State Zip Code Transaction ID: 11ai-000593312 Cleveland Heights OH 44106-3327 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) N/A Not Employed Receipt For: Aggregate Year-to-Date ▼ Primary General Earmarked through ACT Blue Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Cafardi, John, , , Date of Receipt Mailing Address 2277 Jefferson Avenue 09 2021 City State Zip Code Transaction ID: 11ai-000591403 OH Norwood 45212 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **TCHHN** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Earmarked through ACT Blue 1000.00 Other (specify) 11150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7 7